

LD5000076470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

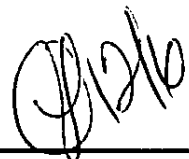
PICK-UP WAIT MAIL

(Business Entity Name)

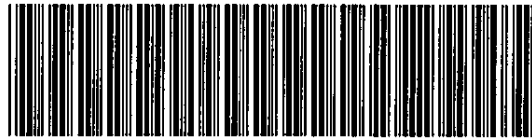
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LUNCH'N-N-MUNCH'N, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAHMOOD RASHID

(Name of Person)

LUNCH'N-N-MUNCH'N, LLC.

(Firm/Company)

1721 E. HALLANDALE BEACH BLVD.

(Address)

HALLANDALE, FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

MAHMOOD RASHID at (954) 483-4508
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LUNCH'N-N-MUNCH'N, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on AUGUST 4, 2005 and assigned document number L05000076470.

SECOND: This amendment is submitted to amend the following:


ARTICLE V

THE NAME AND ADRESSES OF MANAGING MEMBERS/MANAGERS

ARE AS FOLLOWS:

<u>TITLE: MGRM</u>	<u>TITLE: MGRM</u>	<u>TITLE: MGRM</u>
<u>MAHMOOD RASHID</u>	<u>UNEEZA RASHID</u>	<u>ARPITHA NARAYAN</u>
<u>4001 SW 147 AVE</u>	<u>4001 SW 147 AVE</u>	<u>1072 NW 139 TER</u>
<u>MIRAMAR, FL 33027</u>	<u>MIRAMAR, FL 33027</u>	<u>PEMBROKE PINES FL 33028</u>

Dated JULY 10, , 2006 .

x 
Signature of a member or authorized representative of a member

MAHMOOD RASHID
Typed or printed name of signee

Filing Fee: \$25.00

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